

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Association of State Democratic Chairs

ADDRESS (number and street)

430 S. Capitol Street SE

☐Check if different
than previously
reported. (ACC)

Washington

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00259481

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☒

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

09

01

2006

through

09

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Ann Fishman

Signature of Treasurer

Electronically Filed by Ann Fishman

Date

10

19

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Association of State Democratic Chairs

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		42131.79
(b) Cash on Hand at Beginning of Reporting Period	43012.16	
(c) Total Receipts (from Line 19)	0.00	91948.60
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	43012.16	134080.39
7. Total Disbursements (from Line 31)	11716.28	102784.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	31295.88	31295.88
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Association of State Democratic Chairs

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	9	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A)	0.00	400.00
(ii) Unitemized	0.00	400.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	400.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	0.00	400.00
12. Transfers From Affiliated/Other Party Committees	0.00	91548.60
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	91948.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	91948.60

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	11716.28	102784.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	11716.28	102784.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	11716.28	102784.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	11716.28	102784.51

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	0.00	400.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11716.28	102784.51
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11716.28	102784.51

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

Full Name (Last, First, Middle Initial)

A. Sprint PCS

Mailing Address PO Box 62071

City
Baltimore

State
MD

Zip Code
21264-2071

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-01793-03093

Date of Disbursement

/ /

Amount of Each Disbursement this Period

94.35

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 114

City
Newark

State
NJ

Zip Code
07101-0114

Purpose of Disbursement
See Memo Items

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-01794-0000

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3241.38

Full Name (Last, First, Middle Initial)

C. Hilton Pavilion Restaurant

Mailing Address 720 S Michigan Ave

City
Chicago

State
IL

Zip Code
60605

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-01794-03100

Date of Disbursement

/ /

Amount of Each Disbursement this Period

46.92

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

3335.73

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address PO Box 1915

City
Beltsville

State
MD

Zip Code
20704-1915

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03108

Date of Disbursement

/ /

Amount of Each Disbursement this Period

74.49

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Hilton

Mailing Address 720 S Michigan Ave

City
Chicago

State
IL

Zip Code
60605

Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03107

Date of Disbursement

/ /

Amount of Each Disbursement this Period

183.49

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Hilton

Mailing Address 720 S Michigan Ave

City
Chicago

State
IL

Zip Code
60605

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03106

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3.57

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A. Full Name (Last, First, Middle Initial) Hilton		Transaction ID: 21b-01-01794-03105 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	8		2	0	0	6													
Mailing Address 720 S Michigan Ave		Amount of Each Disbursement this Period <table border="1"> <tr> <td>3.59</td> </tr> </table> [MEMO ITEM]	3.59																			
3.59																						
City Chicago	State IL		Zip Code 60605																			
Purpose of Disbursement Printing			<input type="text"/>																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) Hilton		Transaction ID: 21b-01-01794-03104 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	8		2	0	0	6													
Mailing Address 720 S Michigan Ave		Amount of Each Disbursement this Period <table border="1"> <tr> <td>22.92</td> </tr> </table> [MEMO ITEM]	22.92																			
22.92																						
City Chicago	State IL		Zip Code 60605																			
Purpose of Disbursement Printing			<input type="text"/>																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) Yellow Cab		Transaction ID: 21b-01-01794-03103 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	8		2	0	0	6													
Mailing Address 2230 S Michigan Ave Ste 3		Amount of Each Disbursement this Period <table border="1"> <tr> <td>38.05</td> </tr> </table> [MEMO ITEM]	38.05																			
38.05																						
City Chicago	State IL		Zip Code 60616																			
Purpose of Disbursement Transportation			<input type="text"/>																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
SUBTOTAL of Disbursements This Page (optional)		<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00																			
0.00																						
TOTAL This Period (last page this line number only)		<table border="1"> <tr> <td></td> </tr> </table>																				

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

Full Name (Last, First, Middle Initial)

A. Detroit Metro McNama Parking

Mailing Address Detroit Metro Airport

City Detroit State MI Zip Code 48174

Purpose of Disbursement
Parking

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03101

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

21.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Hilton Twigs

Mailing Address 1001 16th Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03115

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

55.63

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Hilton Kitty Oshea's

Mailing Address 720 S Michigan Ave

City Chicago State IL Zip Code 60605

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03099

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

12.47

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

Full Name (Last, First, Middle Initial)

A. Airport Express

Mailing Address 1200 W 35th St

City
Chicago

State
IL

Zip Code
60609

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03098

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

46.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 114

City
Newark

State
NJ

Zip Code
07101-0114

Purpose of Disbursement
Airfare Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03097

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

14.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Orbitz.com

Mailing Address 1961 Premeir Drive, Suite 150

City
Mankato

State
MN

Zip Code
56001

Purpose of Disbursement
Airfare

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03096

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

5.99

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

Full Name (Last, First, Middle Initial)

A. Orbitz.com

Mailing Address 1961 Premeir Drive, Suite 150

City Mankato State MN Zip Code 56001

Purpose of Disbursement

Airfare

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03095

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

198.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Hilton

Mailing Address 720 S Michigan Ave

City Chicago State IL Zip Code 60605

Purpose of Disbursement

Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03102

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

116.74

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 114

City Newark State NJ Zip Code 07101-0114

Purpose of Disbursement

Airfare Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03121

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

14.99

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 114

City
Newark

State
NJ

Zip Code
07101-0114

Purpose of Disbursement
Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-01794-03109

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

35.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Radio Shack

Mailing Address 442 L'Enfant Plaza Shopping Center

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-01794-03122

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

330.74

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Radisson Hotel

Mailing Address 511 Lexington Avenue

City
New York

State
NY

Zip Code
10017

Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 21b-01-01794-03114

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

1008.06

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

Full Name (Last, First, Middle Initial)

A. Orbitz.com

Mailing Address 1961 Premeir Drive, Suite 150

City Mankato State MN Zip Code 56001

Purpose of Disbursement

Airfare

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03120

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

6.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Capital Hilton

Mailing Address 1001 16th Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement

Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03119

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

1.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Capital Hilton

Mailing Address 1001 16th Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement

Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03118

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

398.85

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

Full Name (Last, First, Middle Initial)

A. Orbitz.com

Mailing Address 1961 Premeir Drive, Suite 150

City Mankato State MN Zip Code 56001

Purpose of Disbursement

Airfare

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03117

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

481.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Detroit Metro McNama Parking

Mailing Address Detroit Metro Airport

City Detroit State MI Zip Code 48174

Purpose of Disbursement

Parking

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03116

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

42.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Athena Restaurant

Mailing Address 212 S Halsted St

City Chicago State IL Zip Code 60661

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01794-03123

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

78.10

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

Full Name (Last, First, Middle Initial)

A. Scott Falmlen

Mailing Address North Carolina Democratic Party
220 Hillsborough Street

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
Consultant

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01795-03110

Date of Disbursement

09 / 25 / 2006

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. Perkins Coie LLP

Mailing Address 1201 Third Avenue, 40th Floor

City Seattle State WA Zip Code 98101-3099

Purpose of Disbursement
Legal Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01796-03111

Date of Disbursement

09 / 25 / 2006

Amount of Each Disbursement this Period

2450.00

Full Name (Last, First, Middle Initial)

C. Perkins Coie LLP

Mailing Address 1201 Third Avenue, 40th Floor

City Seattle State WA Zip Code 98101-3099

Purpose of Disbursement
Legal Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01797-03112

Date of Disbursement

09 / 25 / 2006

Amount of Each Disbursement this Period

2282.00

SUBTOTAL of Disbursements This Page (optional)

8232.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 114

City
Newark

State
NJ

Zip Code
07101-0114

Purpose of Disbursement
See Memo Items

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01798-0000

Date of Disbursement

09 / 25 / 2006

Amount of Each Disbursement this Period

148.55

B. James P. Walsh Sedan Services

Mailing Address 1155 Connecticut Avenue,NW

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01798-03113

Date of Disbursement

09 / 25 / 2006

Amount of Each Disbursement this Period

70.00

[MEMO ITEM]

C. Verizon

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1915

City
Beltsville

State
MD

Zip Code
20704-1915

Purpose of Disbursement
Phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-01798-03125

Date of Disbursement

09 / 25 / 2006

Amount of Each Disbursement this Period

78.55

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

148.55

TOTAL This Period (last page this line number only)

11716.28

Image# 26940497200

Form/Schedule: **F3XN**

Transaction ID:

The Committee has very limited administrative expenses because it does not maintain an office or staff. What administrative costs it does incur are primarily, if not exclusively, for travel and meeting expenses. These limited administrative costs are fully disclosed on its reports.
